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PTO/SB/21 (02-04)

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# TRANSMITTAL FORM

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| Application Number     | 09/480,645         |
| Filing Date            | January 10, 2000   |
| First Named Inventor   | Timothy A. LAVERTY |
| Art Unit               | 2626               |
| Examiner Name          | Mark E. Wallerson  |
| Attorney Docket Number | 004944.00025       |

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Technology Center 2600

## ENCLOSURES (check all that apply)

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|---|--|--|

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name  
Jordan N. Bodner, Reg. No. 42,338

Signature

Date

September 21, 2004

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| <b>PTO</b><br><b>FEE TRANSMITTAL</b><br><b>for FY 2004</b><br>Effective 10/01/2003 Patent fees are subject to annual revision. |  | Complete if Known<br>Application Number: 09/480,645<br>Filing Date: January 10, 2000<br>First Named Inventor: Timothy A. LAVERTY<br>Examiner Name: Mark E. Wallerson<br>Art Unit: 2626<br>Attorney Docket No.: 004944.00025 |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | <b>RECEIVED</b><br><b>SEP 24 2004</b><br>Technology Center 2600   |  |
| TOTAL AMOUNT OF PAYMENT (\$) 1140  |  |   |  |

| METHOD OF PAYMENT (check all that apply)  |          |              |          |  | FEE CALCULATION (continued)  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
|---|----------|--------------|----------|--|--|--|--------------|--|-----------------|--------------|----------|--------------|----------|-----------------|----------|----------|----------|----------|------------------------|------|------|------|------|-------------------------------------|-----------------------------------|------|------|------|------|--|---------------------------------------|------|------|------|------|---------------------------|--|------|-------|------|-------|--|--|------|--------------|------|------|--|----------|------|--------|------|--------|---|--|------|-----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|-----|------|-------|------|-----|---|--|------|-------|------|-------|--|--|------|-----|------|-----|------------------|--|------|-----|------|-----|--|--|------|-----|------|-----|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|--------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|-----------------------|--|
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None<br>Order<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: 19-0733<br>Deposit Account Name: Banner & Witcoff, LTD.<br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   |          |              |          |  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td>950</td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17 (q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify) _____</td></tr> <tr> <td colspan="4">*Reduced by Basic Filing Fee Paid</td> <td colspan="2">SUBTOTAL (3) (\$ 950)</td> </tr> </tbody> </table> |  |              |  |                 | Large Entity |          | Small Entity |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$)               | 1051 | 130  | 2051 | 65   | Surcharge - late filing fee or oath |                                   | 1052 | 50   | 2052 | 25   | Surcharge - late provisional filing fee or cover sheet |                                       | 1053 | 130  | 1053 | 130  | Non-English specification |  | 1812 | 2,520 | 1812 | 2,520 | For filing a request for reexamination |  | 1804 | 920*         | 1804 | 920* | Requesting publication of SIR prior to Examiner action |          | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |  | 1251 | 110 | 2251 | 55 | Extension for reply within first month |  | 1252 | 420 | 2252 | 210 | Extension for reply within second month |  | 1253 | 950 | 2253 | 475 | Extension for reply within third month | 950 | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month |  | 1401 | 330 | 2401 | 165 | Notice of Appeal |  | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145 | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17 (q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | SUBTOTAL (3) (\$ 950) |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid   |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1051  | 130      | 2051         | 65       | Surcharge - late filing fee or oath  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1052  | 50       | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1053  | 130      | 1053         | 130      | Non-English specification  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1812  | 2,520    | 1812         | 2,520    | For filing a request for reexamination                                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1804  | 920*     | 1804         | 920*     | Requesting publication of SIR prior to Examiner action                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1805  | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action                        |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1251  | 110      | 2251         | 55       | Extension for reply within first month                                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1252  | 420      | 2252         | 210      | Extension for reply within second month                                    |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1253  | 950      | 2253         | 475      | Extension for reply within third month                                     | 950  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1254  | 1,480    | 2254         | 740      | Extension for reply within fourth month                                    |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1255  | 2,010    | 2255         | 1,005    | Extension for reply within fifth month                                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1401  | 330      | 2401         | 165      | Notice of Appeal   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1402  | 330      | 2402         | 165      | Filing a brief in support of an appeal                                     |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1403  | 290      | 2403         | 145      | Request for oral hearing   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1451  | 1,510    | 1451         | 1,510    | Petition to institute a public use proceeding                              |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1452  | 110      | 2452         | 55       | Petition to revive - unavoidable   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1453  | 1,330    | 2453         | 665      | Petition to revive - unintentional   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1501  | 1,330    | 2501         | 665      | Utility issue fee (or reissue)   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1502  | 480      | 2502         | 240      | Design issue fee   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1503  | 640      | 2503         | 320      | Plant issue fee  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1460  | 130      | 1460         | 130      | Petitions to the Commissioner  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1807  | 50       | 1807         | 50       | Processing fee under 37 CFR 1.17 (q)                                       |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1806  | 180      | 1806         | 180      | Submission of Information Disclosure Stmt                                  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 8021  | 40       | 8021         | 40       | Recording each patent assignment per property (times number of properties) |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1809  | 770      | 2809         | 385      | Filing a submission after final rejection (37 CFR § 1.129(a))              |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1810  | 770      | 2810         | 385      | For each additional invention to be examined (37 CFR § 1.129(b))           |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1801  | 770      | 2801         | 385      | Request for Continued Examination (RCE)                                    |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1802  | 900      | 1802         | 900      | Request for expedited examination of a design application                  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Other fee (specify) _____   |          |              |          |  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| *Reduced by Basic Filing Fee Paid   |          |              |          | SUBTOTAL (3) (\$ 950)  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| FEE CALCULATION   |          |              |          |  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td colspan="2">(\$ 0)</td> </tr> </tbody> </table>   |          |              |          |  | Large Entity   |  | Small Entity |  | Fee Description | Fee Paid     | Fee Code | Fee (\$)     | Fee Code | Fee (\$)        | 1001     | 770      | 2001     | 385      | Utility filing fee     |      | 1002 | 340  | 2002 | 170                                 | Design filing fee                 |      | 1003 | 530  | 2003 | 265  | Plant filing fee                      |      | 1004 | 770  | 2004 | 385                       | Reissue filing fee                                 |      | 1005  | 160  | 2005  | 80                                     | Provisional filing fee                                     |      | SUBTOTAL (1) |      |      |  | (\$ 0)   |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid   |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1001  | 770      | 2001         | 385      | Utility filing fee   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1002  | 340      | 2002         | 170      | Design filing fee  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1003  | 530      | 2003         | 265      | Plant filing fee   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1004  | 770      | 2004         | 385      | Reissue filing fee   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1005  | 160      | 2005         | 80       | Provisional filing fee   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| SUBTOTAL (1)  |          |              |          | (\$ 0)   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td colspan="2">(\$ 190)</td> </tr> </tbody> </table> |          |              |          |  | Large Entity   |  | Small Entity |  | Fee Description | Fee Paid     | Fee Code | Fee (\$)     | Fee Code | Fee (\$)        | 1202     | 18       | 2202     | 9        | Claims in excess of 20 |      | 1201 | 86   | 2201 | 43                                  | Independent claims in excess of 3 |      | 1203 | 290  | 2203 | 145  | Multiple dependent claim, if not paid |      | 1204 | 86   | 2204 | 43                        | ** Reissue independent claims over original patent |      | 1205  | 18   | 2205  | 9                                      | ** Reissue claims in excess of 20 and over original patent |      | SUBTOTAL (2) |      |      |  | (\$ 190) |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Large Entity  |          | Small Entity |          | Fee Description  | Fee Paid   |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1202  | 18       | 2202         | 9        | Claims in excess of 20   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1201  | 86       | 2201         | 43       | Independent claims in excess of 3  |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1203  | 290      | 2203         | 145      | Multiple dependent claim, if not paid                                      |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1204  | 86       | 2204         | 43       | ** Reissue independent claims over original patent                         |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| 1205  | 18       | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent                 |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |
| SUBTOTAL (2)  |          |              |          | (\$ 190)   |  |  |              |  |                 |              |          |              |          |                 |          |          |          |          |                        |      |      |      |      |                                     |                                   |      |      |      |      |  |                                       |      |      |      |      |                           |  |      |       |      |       |  |  |      |              |      |      |  |          |      |        |      |        |   |  |      |     |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |     |      |       |      |     |   |  |      |       |      |       |  |  |      |     |      |     |                  |  |      |     |      |     |  |  |      |     |      |     |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                      |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                       |  |

\*or number previously paid, if greater; For Reissues, see above

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|-------------------|---|-----------------------------------|--------------------|--------------------------|--------------|
| SUBMITTED BY      |   |                                   |                    | Complete (if applicable) |              |
| Name (Print/Type) | Jordan N. Bodner  | Registration No. (Attorney/Agent) | 42,338             | Telephone                | 202-824-3000 |
| Signature         |  | Date                              | September 21, 2004 |                          |              |

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